Effective October 1, 2000									99 / j	180	0 <i>88-</i>	7-	
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS					}			RATE	FEE	7	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		 -	ASIC FEE	 		BASIC FEE		
τo	TAL CHARGEA	ABLE CLAIMS	a ₂ mir	nus 20=	· 2			X\$ 9=		OR	X\$18=	36	
INDEPENDENT CLAIMS			겍 minus 3 =		•]		T	X40=		OR	X80=	80	
MU	LTIPLE DEPEN	NDENT CLAIM P	RESENT					+135=		OR	+270=	٥٥	
* If the difference in column 1 is less than zero, enter *0* in column 2						L	TOTAL		OR	TOTAL	22/		
CLAIMS AS AMENDED - PART II							•	OIAL		Jon	OTHER	826	
	6/8/14	(Column 1)		(Column 2) (Column 3)				MALL	ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIC PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
S	Total	· 9	Minus	· 2	3	-		X\$ 9=		OR	X\$18=	/	
AME	Independent	· /	Minus	••• 4		=		X40=	-	OR	X80=	7	
Ц.	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							135=		OR	+270= /	/	
								TOTAL		, ,	TOTAL	_	
(Column 1) (Column 2) (Column 3)								ADDIT. FEEOR ADDIT. FEE					
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	EST BER XUSLY	(Column 3) PRESENT EXTRA	ſ	RATE ·	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
QN	Total	ļ.	Minus	**		=	>	(\$ 9=		OR	X\$18=		
AME	Independent	pendent • Minus ••• BY PRESENTATION OF MULTIPLE DEPENDENT CL		CLAIM			(40=		OR	X80=			
								135=		OR	+270=		
BEST AVAILABLE COPY								TOTAL HT. FEE		OR	TOTAL ODIT, FEE		
(Column 1) (Column 2) (Column 3)													
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER JUSLY	PRESENT EXTRA	F	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NON	Total	•	Minus	**		=	X\$	\$ 9=		OR	X\$18=		
AME.	Independent		Minus	***		e		(40=		ŀ	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+270=		
**	"If th "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." "If th "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR ,	TOTAL DDIT: FEE		
•	The "Highest Num	ber Previously Pai	d For" (Total or	Independe	ont) is the	highest number (lound i	in the app	ropriate box	i in coli	umn 1.		

PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number